



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+CTD981214091

INSTALLATION ADDRESS

RENGRIT CORPORATION INC.
939 BARNUM AVENUE
BRIDGEPORT

CT 06608

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BRIDGEPORT

CT 06608

REQUEST FOR CHANGE

Note: If your company has moved to a new location, then you must submit a new EPA Notification of Hazardous Waste Activity Form and you must obtain a new US EPA Identification Number.

The numbering on this form corresponds to the numbering on EPA Notification of Hazardous Waste Activity Form.

EPA ID Number: CTD 981214091 Company Name: Bemgrit Corp.

Date of Request: 5/1/96 Town: Bridgeport

SECTION/ITEM TO BE CHANGED	CURRENT INFORMATION	CHANGE INFORMATION TO:	REASON/ COMMENTS
I. Name of Installation			
II. Location of Installation			
III. Mailing Address of Installation			
IV.a. Installation Contact's Name	<u>Raymond Anderson</u>	<u>James L. Ackerman</u>	<u>1995 Biennial Report.</u>
b. Installation Contact's Title	<u>V.P.</u>	<u>—</u>	<u>"</u>
c. Installation Contact's Phone			
V.a. Ownership			
b. Property Owner			
VI. Status	Change Status to:		
Originally notified as: (please circle)			
CESQG (<100 kg/month)			
SQG (100 - 1000 kg/month)			
LQG (>1000 kg/mth)			
Transporter			
T/S/D Facility			

TSHV
6/25/96
QC
7/11/96

*Double 5
Start*

2/8/

*3/9/89
874*

REQUEST FOR CHANGE

EPA ID #: CTD 981214091

COMPANY NAME: Remgrit corporation Inc.

TOWN: Bridgeport

	SECTION/ITEM TO BE CHANGED	OLD VALUE	NEW VALUE	REASON/COMMENTS
* I	Name of Installation	Remgrit Corporation Inc.	Remgrit Corporation	per 1987 Report
II	Location of Installation			
III	Installation Mailing Address			
IV a.	Installation Contact's Name			
b.	Installation Contact Title			
c.	Installation Contact Phone #			
V a.	Ownership			
b.	Property Owner			
VI	Status	(Originally notified as:) SQG (<100kg) SQG (100-1000kg) GENERATOR TRANSPORTER TSDF	Change status to:	
X	EPA Waste Number(s) TSD Facility Process Changes (handling methods).			

* Corresponds to numbering on EPA Notification of Hazardous Waste Activity Form.



Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

Comments

[illegible]

R	E	M	G	R	I	T	C	O	R	P	O	R	A	T	I	O	N	I	N	C
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Street or P.O. Box

[illegible]

Street or Route Number

[illegible]

Name and Title (last, first, and job title)

C	A	N	D	E	R	S	O	N	R	A	Y	M	O	N	D	V	P	2	0	3	3	3	6	2	5	2	5
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A. Name of Installation's Legal Owner

C	Z	B	S		H	O	L	D	I	N	G	S						P
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A. Hazardous Waste Activity

☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.

☐ 2. Transporter

☐ 3. Treater/Storer/Disposer

☐ 4. Underground Injection

☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

B. Used Oil Fuel Activities

☐ 6. Off-Specification Used Oil Fuel
(enter "X" and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify) _____

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒ A. First Notification ☐ B. Subsequent Notification (*complete item C*)

ID — For Official Use Only													
C												T/A	C
W													1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 2	F 0 0 6				
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable
(D001)


☒ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☒ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) R. A. Anderson, VP, Manufacturing	Date Signed June 17, 1985
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